

## FACSIMILE COVER SHEET

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December 12, 2003

**GROUP: 1600**

**FAX NUMBER: 1-703-872-9306**

**ATTORNEY DOCKET NO.: ISPH-0755**

**SERIAL NO.: 10/633,163**

**FILED: August 1, 2003**

**NUMBER OF PAGES: 8**  
(including this sheet)

**MESSAGE: Attached is a Preliminary Amendment.**

**URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!**

\* \* \* \* \*

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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>ISPH-0755</b>	
Applicant(s): <b>Dean and Murray</b>					
Serial No. <b>10/633,163</b>	Filing Date <b>August 1, 2003</b>	Examiner <b>Not yet assigned</b>		Group Art Unit <b>Not yet assigned</b>	
Invention: <b>ANTISENSE MODULATION OF TRANSFORMING GROWTH FACTOR-BETA EXPRESSION</b>					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>50-1619</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
_____ <i>Jane Massey Licata</i> Signature			Dated: <b>December 12, 2003</b>		
<b>Jane Massey Licata</b> <b>Reg. No. 32,257</b> <b>Licata &amp; Tyrrell P.C.</b> <b>66 E. Main Street</b> <b>Marlton, NJ 08053</b> <b>Tel: 856-810-1515</b> <b>Fax: 856-810-1454</b>			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.  _____ Signature of Person Mailing Correspondence  _____ Typed or Printed Name of Person Mailing Correspondence		
cc:					



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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: ISPH-0755  
Inventors: Dean and Murray  
Serial No.: 10/633,163  
Filing Date: August 1, 2003  
Examiner: Not yet assigned  
Group Art Unit: Not yet assigned  
Title: Antisense Modulation of Transforming  
Growth Factor-beta Expression

OFFICIAL

## Certificate of Facsimile Transmission

I hereby certify that this paper is being facsimile  
transmitted to the Patent and Trademark Office on  
the date shown below.

On December 12, 2003

Jane Massey  
Jane Massey Licata Registration No. 32,257

Assistant Commissioner for Patents  
Washington, DC 20231

Preliminary Amendment

Claims 1-17 are pending in this application. Please enter  
the following amendments and remarks into the record.

The **Amendments to the Claims** are reflected in the listing of  
claims which begins on page 2.

**Remarks** begin on page 5.